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APPLICANTS

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** CONTINUING DATA *None*

** FOREIGN APPLICATIONS *✓*

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IF REQUIRED, FOREIGN FILING LICENSE

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS 9	TOTAL CLAIMS 27	INDEPENDENT CLAIM 4
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature	<i>Neogi</i>	<i>Ny</i> Initials			

ADDRESS

513

TITLE

Image processing method and image processing apparatus

FILING FEE RECEIVED 1112	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing I of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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